

Fairfax County Circuit Court CHANCERY Case Cover Sheet

Date Filed: _____

Case Number: _____

PLEASE COMPLETE ALL SHADED AREAS.

PARTIES

| PLAINTIFFS | DEFENDANTS | SERVICE DATE/TYPE |
|------------|------------|-------------------|
| 1. Name: | 1. Name: | |
| 2. Name: | 2. Name: | |
| 3. Name: | 3. Name: | |
| 4. Name: | 4. Name: | |
| 5. Name: | 5. Name: | |

ATTORNEYS

| | |
|--|--|
| PLAINTIFF ATTORNEY: BAR ID: | DEFENSE ATTORNEY: BAR ID: ANSWER? |
| Name: | Name: |
| Firm: | Firm: |
| Street: | Street: |
| | |
| City: State: Zip | City: State: Zip |
| Phone Number: | Phone Number: |

Nature of Suit (Check only one):

| BILL OF COMPLAINT | BILL OF COMPLAINT | ALL OTHER CHANCERY |
|---|--|---|
| <input type="checkbox"/> Accounting (ACC) | <input type="checkbox"/> Quiet Title (QT) | <input type="checkbox"/> Declaratory Judgment (DJ) |
| <input type="checkbox"/> Annulment (ANUL) | <input type="checkbox"/> Specific Performance (SP) | <input type="checkbox"/> Petition (Plaintiff only) (OP) |
| <input type="checkbox"/> Custody (C) | <input type="checkbox"/> Sale of Real Estate (SRE) | <input type="checkbox"/> Expungement Petition (XPUN) |
| <input type="checkbox"/> Enforce Mechanics Lien (EML) | <input type="checkbox"/> Support (SUP) | <input type="checkbox"/> Petition for Injunction (INJ) |
| <input type="checkbox"/> Partition (PART) | | <input type="checkbox"/> Transfer from Law (TLAW) |
| | | |

| |
|--|
| REQUESTED SERVICE: <input type="checkbox"/> SHERIFF <input type="checkbox"/> SPECIAL PROCESS SERVER <input type="checkbox"/> NO SERVICE AT THIS TIME <input type="checkbox"/> PUBLICATION <input type="checkbox"/> OTHER |
|--|